3rd Sub. H.B. 106

1		MEDICAID INSPECTOR GENERAL AMENDMENTS
2		2013 GENERAL SESSION
3		STATE OF UTAH
4		Chief Sponsor: Ryan D. Wilcox
5		Senate Sponsor: Stuart C. Reid
6	Cosponsor	:: James A. Dunnigan
7	LONG TI	TIF
9		Description:
0		is bill changes the Office of Inspector General of Medicaid Services from within the
1		s Office of Planning and Budget to an independent entity within the
2	Departmen	nt of Administrative Services.
3	Highlight	ed Provisions:
4	Th	is bill:
5	•	moves the Office of Inspector General of Medicaid Services into the Department of
6	Administra	ative Services as an independent entity within the department;
7	•	provides for the appointment of the inspector general of Medicaid services by the
8	governor v	with the advice and consent of the Senate;
9	•	permits the removal of the inspector general by the governor for cause;
20	•	preserves the term of the existing inspector general until December 31, 2014;
21	•	establishes a four-year term of office for the inspector general of Medicaid services;
22	•	requires the inspector general of Medicaid services to make recommendations to the
23	Legislature	e and the governor;
1		amends the duties and nowers of the inspector general of Medicaid services:



25	amends the period of time in which the inspector general can review claims;
26	 amends the manner in which the inspector general accesses records;
27	 requires the Office of Inspector General of Medicaid Services to adopt
28	administrative rules to develop audit and investigation procedures;
29	 requires the Office of Inspector General of Medicaid Services to educate health care
30	providers about best practices for Medicaid compliance;
31	 makes technical and conforming amendments; and
32	 includes uncodified language to transition the Office of Inspector General of
33	Medicaid Services out of the Governor's Office of Planning and Budget.
34	Money Appropriated in this Bill:
35	This bill appropriates for fiscal year 2013-14:
36	 to the Governor's Office of Planning and Budget - Inspector General of Medicaid
37	Services:
38	• From the General Fund, (1,020,200)
39	• From Transfers, (1,962,600)
40	• From Pass-Through, 733,400
41	 From Beginning Nonlapsing Balances, (865,300)
42	• Schedule of Programs, Inspector General of Medicaid Services (\$3,114,700)
43	 to the Department of Administrative Services - Office of Inspector General of
44	Medicaid Services:
45	• From General Fund, 1,020,200
46	• From Transfers, 1,962,600
47	• From Pass-through (733,400)
48	 From Beginning Nonlapsing Balances, 865,300
49	 Schedule of Programs Inspector General of Medicaid Services \$3,114,700.
50	Other Special Clauses:
51	This bill provides an immediate effective date.
52	Utah Code Sections Affected:
53	AMENDS:
54	58-37f-301, as last amended by Laws of Utah 2012, Chapters 174 and 239
55	63G-2-305 as last amended by Laws of Utah 2012. Chapters 331 and 377

56		63J-4-202 , as last amended by Laws of Utah 2011, Chapter 151
57	RENU	JMBERS AND AMENDS:
58		63A-13-101 , (Renumbered from 63J-4a-101, as enacted by Laws of Utah 2011,
59	Chapt	ers 151 and 151)
60		63A-13-102, (Renumbered from 63J-4a-102, as enacted by Laws of Utah 2011, Chapter
61	151)	
62		63A-13-201, (Renumbered from 63J-4a-201, as enacted by Laws of Utah 2011, Chapter
63	151)	
64		63A-13-202, (Renumbered from 63J-4a-202, as enacted by Laws of Utah 2011, Chapter
65	151)	
66		63A-13-203, (Renumbered from 63J-4a-203, as enacted by Laws of Utah 2011, Chapter
67	151)	
68		63A-13-204 , (Renumbered from 63J-4a-204, as enacted by Laws of Utah 2011, Chapter
69	151)	
70		63A-13-205 , (Renumbered from 63J-4a-205, as enacted by Laws of Utah 2011, Chapter
71	151)	
72		63A-13-301 , (Renumbered from 63J-4a-301, as enacted by Laws of Utah 2011, Chapter
73	151)	(2) 12 202 (D
74 75	151)	63A-13-302 , (Renumbered from 63J-4a-302, as enacted by Laws of Utah 2011, Chapter
75 76	151)	(2A 12 202 (D
76 77	151)	63A-13-303 , (Renumbered from 63J-4a-303, as enacted by Laws of Utah 2011, Chapter
77 78	151)	63A-13-304 , (Renumbered from 63J-4a-304, as enacted by Laws of Utah 2011, Chapter
78 79	151)	USA-13-304, (Renumbered from 033-4a-304, as effacted by Laws of Otah 2011, Chapter
80	131)	63A-13-401 , (Renumbered from 63J-4a-401, as enacted by Laws of Utah 2011, Chapter
81	151)	USA-13-401, (Renumbered from 053-4a-401, as chaeted by Laws of Otah 2011, Chapter
82	131)	63A-13-501 , (Renumbered from 63J-4a-501, as enacted by Laws of Utah 2011, Chapter
83	151)	to 2011, (Renambered from 655 to 561, as effected by Eaws of Chair 2011, Chapter
84	101)	63A-13-502 , (Renumbered from 63J-4a-502, as enacted by Laws of Utah 2011, Chapter
85	151)	2 2 2 7 , (==================================
86	,	63A-13-601 , (Renumbered from 63J-4a-601, as enacted by Laws of Utah 2011, Chapter
		, , ,

8/	151)
88	63A-13-602, (Renumbered from 63J-4a-602, as enacted by Laws of Utah 2011, Chapter
89	151)
90	ENACTS:
91	63A-13-305 , Utah Code Annotated 1953
92	Uncodified Material Affected:
93	ENACTS UNCODIFIED MATERIAL
94	
95	Be it enacted by the Legislature of the state of Utah:
96	Section 1. Section 58-37f-301 is amended to read:
97	58-37f-301. Access to database.
98	(1) The division shall make rules, in accordance with Title 63G, Chapter 3, Utah
99	Administrative Rulemaking Act, to:
100	(a) effectively enforce the limitations on access to the database as described in this
101	part; and
102	(b) establish standards and procedures to ensure accurate identification of individuals
103	requesting information or receiving information without request from the database.
104	(2) The division shall make information in the database and information obtained from
105	other state or federal prescription monitoring programs by means of the database available only
106	to the following individuals, in accordance with the requirements of this chapter and division
107	rules:
108	(a) personnel of the division specifically assigned to conduct investigations related to
109	controlled substance laws under the jurisdiction of the division;
110	(b) authorized division personnel engaged in analysis of controlled substance
111	prescription information as a part of the assigned duties and responsibilities of their
112	employment;
113	(c) in accordance with a written agreement entered into with the department,
114	employees of the Department of Health:
115	(i) whom the director of the Department of Health assigns to conduct scientific studies
116	regarding the use or abuse of controlled substances, provided that the identity of the individuals
117	and pharmacies in the database are confidential and are not disclosed in any manner to any

118	individual who is not directly involved in the scientific studies; or
119	(ii) when the information is requested by the Department of Health in relation to a
120	person or provider whom the Department of Health suspects may be improperly obtaining or
121	providing a controlled substance;
122	(d) a licensed practitioner having authority to prescribe controlled substances, to the
123	extent the information:
124	(i) (A) relates specifically to a current or prospective patient of the practitioner; and
125	(B) is sought by the practitioner for the purpose of:
126	(I) prescribing or considering prescribing any controlled substance to the current or
127	prospective patient;
128	(II) diagnosing the current or prospective patient;
129	(III) providing medical treatment or medical advice to the current or prospective
130	patient; or
131	(IV) determining whether the current or prospective patient:
132	(Aa) is attempting to fraudulently obtain a controlled substance from the practitioner;
133	or
134	(Bb) has fraudulently obtained, or attempted to fraudulently obtain, a controlled
135	substance from the practitioner;
136	(ii) (A) relates specifically to a former patient of the practitioner; and
137	(B) is sought by the practitioner for the purpose of determining whether the former
138	patient has fraudulently obtained, or has attempted to fraudulently obtain, a controlled
139	substance from the practitioner;
140	(iii) relates specifically to an individual who has access to the practitioner's Drug
141	Enforcement Administration identification number, and the practitioner suspects that the
142	individual may have used the practitioner's Drug Enforcement Administration identification
143	number to fraudulently acquire or prescribe a controlled substance;
144	(iv) relates to the practitioner's own prescribing practices, except when specifically
145	prohibited by the division by administrative rule;
146	(v) relates to the use of the controlled substance database by an employee of the
147	practitioner, described in Subsection (2)(e); or
148	(vi) relates to any use of the practitioner's Drug Enforcement Administration

149	identification number to obtain, attempt to obtain, prescribe, or attempt to prescribe, a
150	controlled substance;
151	(e) in accordance with Subsection (3)(a), an employee of a practitioner described in
152	Subsection (2)(d), for a purpose described in Subsection (2)(d)(i) or (ii), if:
153	(i) the employee is designated by the practitioner as an individual authorized to access
154	the information on behalf of the practitioner;
155	(ii) the practitioner provides written notice to the division of the identity of the
156	employee; and
157	(iii) the division:
158	(A) grants the employee access to the database; and
159	(B) provides the employee with a password that is unique to that employee to access
160	the database in order to permit the division to comply with the requirements of Subsection
161	58-37f-203(3)(b) with respect to the employee;
162	(f) an employee of the same business that employs a licensed practitioner under
163	Subsection (2)(d) if:
164	(i) the employee is designated by the practitioner as an individual authorized to access
165	the information on behalf of the practitioner;
166	(ii) the practitioner and the employing business provide written notice to the division of
167	the identity of the designated employee; and
168	(iii) the division:
169	(A) grants the employee access to the database; and
170	(B) provides the employee with a password that is unique to that employee to access
171	the database in order to permit the division to comply with the requirements of Subsection
172	58-37f-203(3)(b) with respect to the employee;
173	(g) a licensed pharmacist having authority to dispense a controlled substance to the
174	extent the information is sought for the purpose of:
175	(i) dispensing or considering dispensing any controlled substance; or
176	(ii) determining whether a person:
177	(A) is attempting to fraudulently obtain a controlled substance from the pharmacist; or
178	(B) has fraudulently obtained, or attempted to fraudulently obtain, a controlled
179	substance from the pharmacist;

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180	(h) federal, state, and local law enforcement authorities, and state and local	
181	prosecutors, engaged as a specified duty of their employment in enforcing laws:	
182	(i) regulating controlled substances;	
183	(ii) investigating insurance fraud, Medicaid fraud, or Medicare fraud; or	
184	(iii) providing information about a criminal defendant to defense counsel, upon request	
185	during the discovery process, for the purpose of establishing a defense in a criminal case;	
186	(i) employees of the Office of Internal Audit and Program Integrity within the	
187	Department of Health who are engaged in their specified duty of ensuring Medicaid program	
188	integrity under Section 26-18-2.3;	
189	(j) a mental health therapist, if:	
190	(i) the information relates to a patient who is:	
191	(A) enrolled in a licensed substance abuse treatment program; and	
192	(B) receiving treatment from, or under the direction of, the mental health therapist as	
193	part of the patient's participation in the licensed substance abuse treatment program described	
194	in Subsection (2)(j)(i)(A);	
195	(ii) the information is sought for the purpose of determining whether the patient is	
196	using a controlled substance while the patient is enrolled in the licensed substance abuse	
197	treatment program described in Subsection (2)(j)(i)(A); and	
198	(iii) the licensed substance abuse treatment program described in Subsection	
199	(2)(j)(i)(A) is associated with a practitioner who:	
200	(A) is a physician, a physician assistant, an advance practice registered nurse, or a	
201	pharmacist; and	
202	(B) is available to consult with the mental health therapist regarding the information	
203	obtained by the mental health therapist, under this Subsection (2)(j), from the database;	
204	(k) an individual who is the recipient of a controlled substance prescription entered into	
205	the database, upon providing evidence satisfactory to the division that the individual requesting	
206	the information is in fact the individual about whom the data entry was made;	
207	(l) the inspector general, or a designee of the inspector general, of the Office of	
208	Inspector General of Medicaid Services, for the purpose of fulfilling the duties described in	

(m) the following licensed physicians for the purpose of reviewing and offering an

Title [63J, Chapter 4a] 63A, Chapter 13, Part 2, Office Duties and Powers; and

211 opinion on an individual's request for workers' compensation benefits under Title 34A, Chapter 212 2, Workers' Compensation Act, or Title 34A, Chapter 3, Utah Occupational Disease Act: 213 (i) a member of the medical panel described in Section 34A-2-601; or 214 (ii) a physician offering a second opinion regarding treatment. 215 (3) (a) A practitioner described in Subsection (2)(d) may designate up to three 216 employees to access information from the database under Subsection (2)(e), (2)(f), or (4)(c). 217 (b) The division shall make rules, in accordance with Title 63G, Chapter 3, Utah 218 Administrative Rulemaking Act, to: 219 (i) establish background check procedures to determine whether an employee 220 designated under Subsection (2)(e), (2)(f), or (4)(c) should be granted access to the database; 221 and 222 (ii) establish the information to be provided by an emergency room employee under 223 Subsection (4). 224 (c) The division shall grant an employee designated under Subsection (2)(e), (2)(f), or 225 (4)(c) access to the database, unless the division determines, based on a background check, that 226 the employee poses a security risk to the information contained in the database. 227 (4) (a) An individual who is employed in the emergency room of a hospital may 228 exercise access to the database under this Subsection (4) on behalf of a licensed practitioner if 229 the individual is designated under Subsection (4)(c) and the licensed practitioner: 230 (i) is employed in the emergency room; 231 (ii) is treating an emergency room patient for an emergency medical condition; and 232 (iii) requests that an individual employed in the emergency room and designated under 233 Subsection (4)(c) obtain information regarding the patient from the database as needed in the 234 course of treatment. 235 (b) The emergency room employee obtaining information from the database shall, 236 when gaining access to the database, provide to the database the name and any additional 237 identifiers regarding the requesting practitioner as required by division administrative rule 238 established under Subsection (3)(b). 239 (c) An individual employed in the emergency room under this Subsection (4) may 240 obtain information from the database as provided in Subsection (4)(a) if:

(i) the employee is designated by the practitioner as an individual authorized to access

242	the information on behan of the practitioner;	
243	(ii) the practitioner and the hospital operating the emergency room provide written	
244	notice to the division of the identity of the designated employee; and	
245	(iii) the division:	
246	(A) grants the employee access to the database; and	
247	(B) provides the employee with a password that is unique to that employee to access	
248	the database in order to permit the division to comply with the requirements of Subsection	
249	58-37f-203(3)(b) with respect to the employee.	
250	(d) The division may impose a fee, in accordance with Section 63J-1-504, on a	
251	practitioner who designates an employee under Subsection (2)(e), (2)(f), or (4)(c) to pay for the	he
252	costs incurred by the division to conduct the background check and make the determination	
253	described in Subsection (3)(b).	
254	(5) (a) An individual who is granted access to the database based on the fact that the	
255	individual is a licensed practitioner or a mental health therapist shall be denied access to the	
256	database when the individual is no longer licensed.	
257	(b) An individual who is granted access to the database based on the fact that the	
258	individual is a designated employee of a licensed practitioner shall be denied access to the	
259	database when the practitioner is no longer licensed.	
260	Section 2. Section 63A-13-101 , which is renumbered from Section 63J-4a-101 is	
261	renumbered and amended to read:	
262	CHAPTER 13. OFFICE OF INSPECTOR GENERAL OF MEDICAID SERVICE	ES
263	Part 1. General Provisions	
264	[63J-4a-101]. <u>63A-13-101.</u> Title.	
265	This chapter is known as "Office of Inspector General of Medicaid Services."	
266	Section 3. Section 63A-13-102 , which is renumbered from Section 63J-4a-102 is	
267	renumbered and amended to read:	
268	[63J-4a-102]. 63A-13-102. Definitions.	
269	As used in this chapter:	
270	(1) "Abuse" means:	
271	(a) an action or practice that:	
272	(i) is inconsistent with sound fiscal, business, or medical practices; and	

273	(ii) results, or may result, in unnecessary Medicaid related costs; or
274	(b) reckless or negligent upcoding.
275	(2) "Claimant" means a person that:
276	(a) provides a service; and
277	(b) submits a claim for Medicaid reimbursement for the service.
278	(3) "Department" means the Department of Health, created in Section 26-1-4.
279	(4) "Division" means the Division of Health Care Financing, created in Section
280	26-18-2.1.
281	(5) "Fraud" means intentional or knowing:
282	(a) deception, misrepresentation, or upcoding in relation to Medicaid funds, costs, a
283	claim, reimbursement, or services; or
284	(b) a violation of a provision of Subsections 26-20-3 through 26-20-7.
285	(6) "Fraud unit" means the Medicaid Fraud Control Unit of the attorney general's
286	office.
287	(7) "Health care professional" means a person licensed under:
288	(a) Title 58, Chapter 5a, Podiatric Physician Licensing Act;
289	(b) Title 58, Chapter 16a, Utah Optometry Practice Act;
290	(c) Title 58, Chapter 17b, Pharmacy Practice Act;
291	(d) Title 58, Chapter 24b, Physical Therapy Practice Act;
292	(e) Title 58, Chapter 31b, Nurse Practice Act;
293	(f) Title 58, Chapter 40, Recreational Therapy Practice Act;
294	(g) Title 58, Chapter 41, Speech-language Pathology and Audiology Licensing Act;
295	(h) Title 58, Chapter 42a, Occupational Therapy Practice Act;
296	(i) Title 58, Chapter 44a, Nurse Midwife Practice Act;
297	(j) Title 58, Chapter 49, Dietitian Certification Act;
298	(k) Title 58, Chapter 60, Mental Health Professional Practice Act;
299	(l) Title 58, Chapter 67, Utah Medical Practice Act;
300	(m) Title 58, Chapter 68, Utah Osteopathic Medical Practice Act;
301	(n) Title 58, Chapter 69, Dentist and Dental Hygienist Practice Act;
302	(o) Title 58, Chapter 70a, Physician Assistant Act; and
303	(p) Title 58, Chapter 73, Chiropractic Physician Practice Act.

304	(8) "Inspector general" means the inspector general of the office, appointed under
305	Section [63J-4a-201] <u>63A-13-201</u> .
306	(9) "Office" means the Office of Inspector General of Medicaid Services, created in
307	Section [63J-4a-201] <u>63A-13-201</u> .
308	(10) "Provider" means a person that provides:
309	(a) medical assistance, including supplies or services, in exchange, directly or
310	indirectly, for Medicaid funds; or
311	(b) billing or recordkeeping services relating to Medicaid funds.
312	(11) "Upcoding" means assigning an inaccurate billing code for a service that is
313	payable or reimbursable by Medicaid funds, if the correct billing code for the service, taking
314	into account reasonable opinions derived from official published coding definitions, would
315	result in a lower Medicaid payment or reimbursement.
316	(12) "Waste" means overutilization of resources or inappropriate payment.
317	Section 4. Section 63A-13-201, which is renumbered from Section 63J-4a-201 is
318	renumbered and amended to read:
319	Part 2. Office and Powers
320	[63J-4a-201]. <u>63A-13-201.</u> Creation of office Inspector general
321	Appointment Term.
322	(1) There is created[, within the Governor's Office of Planning and Budget, the] an
323	independent entity within the Department of Administrative Services known as the "Office of
324	Inspector General of Medicaid Services."
325	(2) The governor shall:
326	(a) appoint the inspector general[7] of Medicaid services in accordance with Subsection
327	(5)(b), and with the advice and consent of the Senate[-]; and
328	(b) establish the salary for the inspector general of Medicaid services based upon a
329	recommendation from the Department of Human Resource Management which shall be based
330	on a market salary survey conducted by the Department of Human Resource Management.
331	(3) A person appointed as the inspector general shall:
332	(a) be a certified public accountant or a certified internal auditor; and
333	(b) have the following qualifications:

335	investigate, and identify fraud, waste, and abuse;
336	(ii) strong management skills;
337	(iii) extensive knowledge of, and at least seven years experience with, performance
338	audit methodology;
339	(iv) the ability to oversee and execute an audit; and
340	(v) strong interpersonal skills.
341	(4) The inspector general of Medicaid services:
342	(a) shall, except as provided in Subsection (5), serve a term of [two] four years; and
343	(b) may be removed by the governor, for cause.
344	(5) (a) If the inspector general is removed for cause, a new inspector general shall be
345	appointed, with the advice and consent of the Senate, to serve [a two-year term.] the remainder
346	of the term of the inspector general of Medicaid services who was removed for cause.
347	(b) The term of office for the inspector general of Medicaid services in office on
348	January 1, 2013, shall end on December 31, 2014. The governor may appoint an inspector
349	general for a four-year term on January 1, 2015.
350	(6) The office of the inspector general for Medicaid services:
351	(a) is not under the supervision of, and does not take direction from, the executive
352	director, except for administrative purposes;
353	(b) shall use the legal services of the state attorney general's office;
354	(c) shall submit a budget for the office directly to the governor;
355	(d) except as prohibited by federal law, is subject to:
356	(i) Title 51, Chapter 5, Funds Consolidation Act;
357	(ii) Title 51, Chapter 7, State Money Management Act;
358	(iii) Title 63A, Utah Administrative Services Code;
359	(iv) Title 63G, Chapter 3, Utah Administrative Rulemaking Act;
360	(v) Title 63G, Chapter 4, Administrative Procedures Act;
361	(vi) Title 63G, Chapter 6a, Utah Procurement Code;
362	(vii) Title 63J, Chapter 1, Budgetary Procedures Act;
363	(viii) Title 63J, Chapter 2, Revenue Procedures and Control Act;
364	(ix) Title 67, Chapter 19, Utah State Personnel Management Act;
365	(x) Title 67, Chapter 16, Utah Public Officers' and Employees' Ethics Act;

300	(xi) Title 32, Chapter 4, Open and Fublic Meetings Act;
367	(xii) Title 63G, Chapter 2, Government Records Access and Management Act; and
368	(xiii) coverage under the Risk Management Fund created under Section 63A-4-201;
369	(e) when requested, shall provide reports to the governor, the president of the Senate,
370	or the speaker of the House; and
371	(f) shall adopt administrative rules to establish policies for employees that are
372	substantially similar to the administrative rules adopted by the Department of Human Resource
373	Management.
374	Section 5. Section 63A-13-202, which is renumbered from Section 63J-4a-202 is
375	renumbered and amended to read:
376	[63J-4a-202]. 63A-13-202. Duties and powers of inspector general and
377	office.
378	(1) The inspector general of Medicaid services shall:
379	(a) administer, direct, and manage the office;
380	(b) inspect and monitor the following in relation to the state Medicaid program:
381	(i) the use and expenditure of federal and state funds;
382	(ii) the provision of health benefits and other services;
383	(iii) implementation of, and compliance with, state and federal requirements; and
384	(iv) records and recordkeeping procedures;
385	(c) receive reports of potential fraud, waste, or abuse in the state Medicaid program;
386	(d) investigate and identify potential or actual fraud, waste, or abuse in the state
387	Medicaid program;
388	(e) consult with the Centers for Medicaid and Medicare Services and other states to
389	determine and implement best practices for:
390	(i) educating and communicating with health care professionals and providers about
391	program and audit policies and procedures;
392	(ii) discovering and eliminating fraud, waste, and abuse of Medicaid funds; and
393	(iii) differentiating between honest mistakes and intentional errors, or fraud, waste, and
394	abuse, if the office enters into settlement negotiations with the provider or health care
395	professional;
396	(f) obtain, develop, and utilize computer algorithms to identify fraud, waste, or abuse

397	in the state Medicaid program;
398	(g) work closely with the fraud unit to identify and recover improperly or fraudulently
399	expended Medicaid funds;
400	(h) audit, inspect, and evaluate the functioning of the division for the purpose of
401	making recommendations to the Legislature and the department to ensure that the state
402	Medicaid program is managed:
403	(i) in the most efficient and cost-effective manner possible; and
404	(ii) in a manner that promotes adequate provider and health care professional
405	participation and the provision of appropriate health benefits and services;
406	(i) regularly advise the department and the division of an action that should be taken to
407	ensure that the state Medicaid program is managed in the most efficient and cost-effective
408	manner possible;
409	(j) refer potential criminal conduct, relating to Medicaid funds or the state Medicaid
410	program, to the fraud unit;
411	(k) refer potential criminal conduct, including relevant data from the controlled
412	substance database, relating to Medicaid fraud, to law enforcement in accordance with Title 58
413	Chapter 37f, Controlled Substance Database Act;
414	[(k)] (1) determine ways to:
415	(i) identify, prevent, and reduce fraud, waste, and abuse in the state Medicaid program
416	and
417	(ii) [recoup costs,] balance efforts to reduce costs[,] and avoid or minimize increased
418	costs of the state Medicaid program with the need to encourage robust health care professional
419	and provider participation in the state Medicaid program;
420	[(l) seek recovery of]
421	(m) recover improperly paid Medicaid funds;
422	[(m)] (n) track recovery of Medicaid funds by the state;
423	$[\frac{(n)}{(0)}]$ in accordance with Section $[\frac{63J-4a-501}{63A-13-502}]$:
424	(i) report on the actions and findings of the inspector general; and
425	(ii) make recommendations to the Legislature and the governor;
426	[(o)] <u>(p)</u> provide training to:
427	(i) agencies and employees on identifying potential fraud, waste, or abuse of Medicaid

428	funds; and
429	(ii) health care professionals and providers on program and audit policies and
430	compliance; and
431	[(p)] (q) develop and implement principles and standards for the fulfillment of the
432	duties of the inspector general, based on principles and standards used by:
433	(i) the Federal Offices of Inspector General;
434	(ii) the Association of Inspectors General; and
435	(iii) the United States Government Accountability Office.
436	(2) (a) The office may, in fulfilling the duties under Subsection (1), conduct a
437	performance or financial audit of:
438	[(a)] (i) a state executive branch entity or a local government entity, including an entity
439	described in [Subsection 63J-4a-301(3)] Section 63A-13-301, that:
440	[(i)] (A) manages or oversees a state Medicaid program; or
441	[(ii)] (B) manages or oversees the use or expenditure of state or federal Medicaid
442	funds; or
443	[(b)] (ii) Medicaid funds received by a person by a grant from, or under contract with, a
444	state executive branch entity or a local government entity.
445	(b) (i) The office may not, in fulfilling the duties under Subsection (1), amend the state
446	Medicaid program or change the policies and procedures of the state Medicaid program.
447	(ii) The office shall identify conflicts between the state Medicaid plan, department
448	administrative rules, Medicaid provider manuals, and Medicaid information bulletins and
449	recommend that the department reconcile inconsistencies. If the department does not reconcile
450	the inconsistencies, the office shall report the inconsistencies to the Legislature's
451	Administrative Rules Review Committee created in Section 63G-3-501.
452	(iii) Beginning July 1, 2013, the office shall review a Medicaid provider manual and a
453	Medicaid information bulletin in accordance with Subsection (2)(b)(ii), prior to the department
454	making the provider manual or Medicaid information bulletin available to the public.
455	(c) Beginning July 1, 2013, the department shall submit a Medicaid provider manual
456	and a Medicaid information bulletin to the office for the review required by Subsection
457	(2)(b)(ii) prior to releasing the document to the public. The department and the office of the
458	inspector general shall enter into a memorandum of understanding regarding the timing of the

459	review process under Subsection (2)(b)(iii).
460	(3) (a) The office shall, in fulfilling the duties under this section to investigate,
461	discover, and recover fraud, waste, and abuse in the Medicaid program, apply the state
462	Medicaid plan, department administrative rules, Medicaid provider manuals, and Medicaid
463	information bulletins in effect at the time the medical services were provided.
464	(b) A health care provider may rely on the policy interpretation included in a current
465	Medicaid provider manual or a current Medicaid information bulletin that is available to the
466	<u>public.</u>
467	[(3)] (4) The inspector general of Medicaid services, or a designee of the inspector
468	general of Medicaid services within the office, may take a sworn statement or administer an
469	oath.
470	Section 6. Section 63A-13-203 , which is renumbered from Section 63J-4a-203 is
471	renumbered and amended to read:
472	[63J-4a-203]. <u>63A-13-203.</u> Memorandum of understanding with fraud
473	unit.
474	The inspector general shall enter into a memorandum of understanding with the fraud
475	unit to:
476	(1) formalize communication, cooperation, coordination of efforts, and the sharing of
477	information, on a regular basis, between the office and the fraud unit;
478	(2) provide for reporting criminal activity discovered by the office to the fraud unit;
479	(3) ensure that investigations and other actions by the office and the fraud unit do not
480	conflict; and
481	(4) provide for the sharing and classification of records between the office and the
482	fraud unit under the Government Records Access and Management Act.
483	Section 7. Section 63A-13-204 , which is renumbered from Section 63J-4a-204 is
484	renumbered and amended to read:
485	[63J-4a-204]. <u>63A-13-204.</u> Selection and review of claims.
486	(1) (a) [On an annual basis, the] The office shall periodically select and review a
487	representative sample of claims submitted for reimbursement under the state Medicaid program
488	to determine whether fraud, waste, or abuse occurred.
489	(b) The office shall limit its review for waste and abuse under Subsection (1)(a) to 36

490	months prior to the date of the inception of the investigation or 72 months if there is a credible
491	allegation of fraud. In the event the office or the fraud unit determines that there is fraud as
492	defined in Subsection 63A-13-102(5), then the statute of limitations defined in Subsection
493	26-20-15(1) shall apply.
494	(2) The office may directly contact the recipient of record for a Medicaid reimbursed
495	service to determine whether the service for which reimbursement was claimed was actually
496	provided to the recipient of record.
497	(3) The office shall generate statistics from the sample described in Subsection (1) to
498	determine the type of fraud, waste, or abuse that is most advantageous to focus on in future
499	audits or investigations.
500	Section 8. Section 63A-13-205, which is renumbered from Section 63J-4a-205 is
501	renumbered and amended to read:
502	[63J-4a-205]. <u>63A-13-205.</u> Placement of hold on claims for reimbursement
503	Injunction.
504	(1) The inspector general or the inspector general's designee may, without prior notice,
505	order a hold on the payment of a claim for reimbursement submitted by a claimant if there is
506	reasonable cause to believe that the claim, or payment of the claim, constitutes fraud, waste, or
507	abuse, or is otherwise inaccurate.
508	(2) The office shall, within seven days after the day on which a hold described in
509	Subsection (1) is ordered, notify the claimant that the hold has been placed.
510	(3) The inspector general or the inspector general's designee may not maintain a hold
511	longer than is necessary to determine whether the claim, or payment of the claim, constitutes
512	fraud, waste, or abuse, or is otherwise inaccurate.
513	(4) A claimant may, at any time during which a hold is in place, appeal the hold under
514	Title 63G, Chapter 4, Administrative Procedures Act.
515	(5) If a claim is approved or denied before a hearing is held under Title 63G, Chapter 4,
516	Administrative Procedures Act, the appeal shall be dismissed as moot.
517	(6) The inspector general may request that the attorney general's office seek an
518	injunction to prevent a person from disposing of an asset that is potentially subject to recovery
519	by the state to recover funds due to a person's fraud or abuse.

(7) The department and the division shall fully comply with a hold ordered under this

521	section.
522	Section 9. Section 63A-13-301, which is renumbered from Section 63J-4a-301 is
523	renumbered and amended to read:
524	Part 3. Investigation or Audit
525	[63J-4a-301]. <u>63A-13-301</u> . Access to records Retention of designation
526	under Government Records Access and Management Act.
527	(1) In order to fulfill the duties described in Section [63J-4a-202,] 63A-13-202, and in
528	the manner provided in Subsection (4), the office shall have unrestricted access to all records of
529	state executive branch entities, all local government entities, and all providers relating, directly
530	or indirectly, to:
531	(a) the state Medicaid program;
532	(b) state or federal Medicaid funds;
533	(c) the provision of Medicaid related services;
534	(d) the regulation or management of any aspect of the state Medicaid program;
535	(e) the use or expenditure of state or federal Medicaid funds;
536	(f) suspected or proven fraud, waste, or abuse of state or federal Medicaid funds;
537	(g) Medicaid program policies, practices, and procedures;
538	(h) monitoring of Medicaid services or funds; or
539	(i) a fatality review of a person who received Medicaid funded services.
540	(2) The office shall have access to information in any database maintained by the state
541	or a local government to verify identity, income, employment status, or other factors that affect
542	eligibility for Medicaid services.
543	(3) The records described in Subsections (1) and (2) include records held or maintained
544	by the department, the division, the Department of Human Services, the Department of
545	Workforce Services, a local health department, a local mental health authority, or a school
546	district. The records described in Subsection (1) include records held or maintained by a
547	provider. When conducting an audit of a provider, the office shall, to the extent possible, limit
548	the records accessed to the scope of the audit.
549	(4) A record, described in Subsection (1) or (2), that is accessed or copied by the
550	office:
551	(a) may be reviewed or copied by the office during normal business hours[; and],

552	unless otherwise requested by the provider or health care professional under Subsection (4)(b);
553	(b) unless there is a credible allegation of fraud, shall be accessed, reviewed, and
554	copied in a manner, on a day, and at a time that is minimally disruptive to the health care
555	professional's or provider's care of patients, as requested by the health care professional or
556	provider;
557	(c) may be submitted electronically;
558	(d) may be submitted together with other records for multiple claims; and
559	[(b)] (e) if it is a government record, shall retain the classification made by the entity
560	responsible for the record, under Title 63G, Chapter 2, Government Records Access and
561	Management Act.
562	(5) Notwithstanding any provision of state law to the contrary, the office shall have the
563	same access to all records, information, and databases [that] to which the department or the
564	division have access [to].
565	(6) The office shall comply with the requirements of federal law, including the Health
566	Insurance Portability and Accountability Act of 1996 and 42 C.F.R., Part 2, relating to [the
567	confidentiality of alcohol and drug abuse records, in] the office's:
568	(a) access, review, retention, and use of records; and
569	(b) use of information included in, or derived from, records.
570	Section 10. Section 63A-13-302, which is renumbered from Section 63J-4a-302 is
571	renumbered and amended to read:
572	[63J-4a-302]. <u>63A-13-302.</u> Access to employees Cooperating with
573	investigation or audit.
574	(1) The office shall have access to interview the following persons if the inspector
575	general determines that the interview may assist the inspector general in fulfilling the duties
576	described in Section [63J-4a-202] <u>63A-13-202</u> :
577	(a) a state executive branch official, executive director, director, or employee;
578	(b) a local government official or employee;
579	(c) a consultant or contractor of a person described in Subsection (1)(a) or (b); or
580	(d) a provider or a health care professional or an employee of a provider or a health
581	care professional.
582	(2) A person described in Subsection (1) and each supervisor of the person shall fully

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583	cooperate with the office by:
584	(a) providing the office or the inspector general's designee with access to interview the
585	person;
586	(b) completely and truthfully answering questions asked by the office or the inspector
587	general's designee;
588	(c) providing the records, described in Subsection [63J-4a-301(1),] 63A-13-301(1), in
589	the manner described in Subsection 63A-13-301(4), requested by the office or the inspector
590	general's designee; and
591	(d) providing the office or the inspector general's designee with information relating to
592	the office's investigation or audit.
593	(3) A person described in Subsection (1)(a) or (b) and each supervisor of the person
594	shall fully cooperate with the office by:
595	(a) providing records requested by the office or the inspector general's designee in the
596	manner described in Subsection 63A-13-301(4); and
597	(b) providing the office or the inspector general's designee with information relating to
598	the office's investigation or audit, including information that is classified as private, controlled,
599	or protected under Title 63G, Chapter 2, Government Records Access and Management Act.
600	Section 11. Section 63A-13-303, which is renumbered from Section 63J-4a-303 is
601	renumbered and amended to read:
602	[63J-4a-303]. <u>63A-13-303.</u> Cooperation and support.
603	The department, the division, each consultant or contractor of the department or
604	division, and each provider shall provide its full cooperation and support to the inspector
605	general and the office in fulfilling the duties of the inspector general and the office.
606	Section 12. Section 63A-13-304, which is renumbered from Section 63J-4a-304 is
607	renumbered and amended to read:
608	[63J-4a-304]. <u>63A-13-304.</u> Interference with an investigation or audit
609	prohibited.
610	No person may:
611	(1) interfere with or impede an investigation or audit of the office or fraud unit; or

(2) interfere with the office relative to the content of a report, the conclusions reached

in a report, or the manner of disclosing the results and findings of the office.

614	Section 13. Section 63A-13-305 is enacted to read:
615	63A-13-305. Audit and investigation procedures.
616	(1) (a) The office shall, in accordance with Section 63A-13-602, adopt administrative
617	rules in consultation with providers and health care professionals subject to audit and
618	investigation under this chapter to establish procedures for audits and investigations that are
619	fair and consistent with the duties of the office under this chapter.
620	(b) If the providers and health care professionals do not agree with the rules proposed
621	or adopted by the office under Subsection (1)(a) or Section 63A-13-602, the providers or health
622	care professionals may:
623	(i) request a hearing for the proposed administrative rule or seek any other remedies
624	under the provisions of Title 63G, Chapter 3, Utah Administrative Rulemaking Act; and
625	(ii) request a review of the rule by the Legislature's Administrative Rules Review
626	Committee created in Section 63G-3-501.
627	(2) The office shall notify and educate providers and health care professionals subject
628	to audit and investigation under this chapter of the providers' and health care professionals'
629	responsibilities and rights under the administrative rules adopted by the office under the
630	provisions of this section and Section 63A-13-602.
631	Section 14. Section 63A-13-401, which is renumbered from Section 63J-4a-401 is
632	renumbered and amended to read:
633	Part 4. Subpoena Power
634	[63J-4a-401]. <u>63A-13-401.</u> Subpoena power Enforcement.
635	(1) The inspector general has the power to issue a subpoena to obtain a record or
636	interview a person that the office or inspector general has the right to access under Part 3,
637	Investigation or Audit.
638	(2) A person who fails to comply with a subpoena issued by the inspector general or
639	who refuses to testify regarding a matter upon which the person may be lawfully interrogated:
640	(a) is in contempt of the inspector general; and
641	(b) upon request by the inspector general, the attorney general shall:
642	(i) file a motion for an order to compel obedience to the subpoena with the district
643	court;
644	(ii) file, with the district court, a motion for an order to show cause why the penalties

645	established in Title 78B, Chapter 6, Part 3, Contempt, should not be imposed upon the person
646	named in the subpoena for contempt of the inspector general; or
647	(iii) pursue other legal remedies against the person.
648	(3) Upon receipt of a motion under Subsection (2), the court:
649	(a) shall expedite the hearing and decision on the motion; and
650	(b) may:
651	(i) order the person named in the subpoena to comply with the subpoena; and
652	(ii) impose any penalties authorized by Title 78B, Chapter 6, Part 3, Contempt, upon
653	the person named in the subpoena for contempt of the inspector general.
654	(4) (a) If a subpoena described in this section requires the production of accounts,
655	books, papers, documents, or other tangible items, the person or entity to whom it is directed
656	may petition a district court to quash or modify the subpoena at or before the time specified in
657	the subpoena for compliance.
658	(b) The inspector general may respond to a motion to quash or modify the subpoena by
659	pursuing any remedy authorized by Subsection (3).
660	(c) If the court finds that a subpoena requiring the production of accounts, books,
661	papers, documents, or other tangible items is unreasonable or oppressive, the court may quash
662	or modify the subpoena.
663	(5) Nothing in this section prevents the inspector general from seeking an extraordinary
664	writ to remedy contempt of the inspector general.
665	(6) Any party aggrieved by a decision of a court under this section may appeal that
666	decision directly to the Utah Supreme Court.
667	Section 15. Section 63A-13-501, which is renumbered from Section 63J-4a-501 is
668	renumbered and amended to read:
669	Part 5. Reporting
670	[63J-4a-501]. 63A-13-501. Duty to report potential Medicaid fraud to the
671	office or fraud unit.
672	(1) [A] (a) Except as provided in Subsection (1)(b), a health care professional, a
673	provider, or a state or local government official or employee who becomes aware of fraud,
674	waste, or abuse shall report the fraud, waste, or abuse to the office or the fraud unit.
675	(b) (i) The reporting exception in this Subsection (1)(b) does not apply to fraud and

676	abuse. Suspected fraud and abuse shall be reported in accordance with Subsection (1).
677	(ii) If a person described in Subsection (1)(a) reasonably believes that the suspected
678	waste is a mistake, and is not intentional or knowing, the person may first report the suspected
679	waste to the provider, health care professional, or compliance officer for the provider or health
680	care professional.
681	(iii) The person described in Subsection (1)(b) shall report the suspected waste to the
682	office or the fraud unit unless, within 30 days after the day on which the person reported the
683	suspected waste to the provider, health care professional, or compliance officer, the provider,
684	health care professional, or compliance officer demonstrates to the person that the suspected
685	waste has been corrected.
686	(2) A person who makes a report under Subsection (1) may request that the person's
687	name not be released in connection with the investigation.
688	(3) If a request is made under Subsection (2), the person's identity may not be released
689	to any person or entity other than the office, the fraud unit, or law enforcement, unless a court
690	of competent jurisdiction orders that the person's identity be released.
691	Section 16. Section 63A-13-502 , which is renumbered from Section 63J-4a-502 is
692	renumbered and amended to read:
693	[63J-4a-502]. 63A-13-502. Report and recommendations to governor and
694	Executive Appropriations Committee.
695	(1) The inspector general of Medicaid services shall, on an annual basis, prepare a
696	written report on the activities of the office for the preceding fiscal year.
697	(2) The report shall include:
698	(a) non-identifying information, including statistical information, on:
699	(i) the items described in Subsection [63J-4a-202(1)(b) and Section 63J-4a-204]
700	63A-13-202(1)(b) and Section 63A-13-204;
701	(ii) action taken by the office and the result of that action;
702	(iii) fraud, waste, and abuse in the state Medicaid program;
703	(iv) the recovery of fraudulent or improper use of state and federal Medicaid funds;
704	(v) measures taken by the state to discover and reduce fraud, waste, and abuse in the
705	state Medicaid program;
706	(vi) audits conducted by the office; [and]

707	(vii) investigations conducted by the office and the results of those investigations; and
708	(viii) administrative and educational efforts made by the office and the division to
709	improve compliance with Medicaid program policies and requirements;
710	(b) recommendations on action that should be taken by the Legislature or the governor
711	to:
712	(i) improve the discovery and reduction of fraud, waste, and abuse in the state
713	Medicaid program;
714	(ii) improve the recovery of fraudulently or improperly used Medicaid funds; and
715	(iii) reduce costs and avoid or minimize increased costs in the state Medicaid program;
716	(c) recommendations relating to rules, policies, or procedures of a state or local
717	government entity; and
718	(d) services provided by the state Medicaid program that exceed industry standards.
719	(3) The report described in Subsection (1) may not include any information that would
720	interfere with or jeopardize an ongoing criminal investigation or other investigation.
721	(4) [The inspector general] On or before October 1 of each year, the inspector general
722	of Medicaid services shall provide the report described in Subsection (1) to the Executive
723	Appropriations Committee of the Legislature and to the governor on or before October 1 of
724	each year.
725	(5) The inspector general of Medicaid services shall present the report described in
726	Subsection (1) to the Executive Appropriations Committee of the Legislature before November
727	30 of each year.
728	Section 17. Section 63A-13-601 , which is renumbered from Section 63J-4a-601 is
729	renumbered and amended to read:
730	Part 6. Miscellaneous Provisions
731	[63J-4a-601]. 63A-13-601. Provision of contract services to Office of
732	Inspector General of Medicaid Services.
733	(1) The division and the assistant attorneys general assigned to the division shall
734	provide, without charge, contract review, contract enforcement, and other contract management
735	services to the office.
736	(2) The division shall ensure that the services described in Subsection (1) are provided
737	in an expeditious manner.

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738	(3) The attorney general shall designate one of the assistant attorneys general assigned
739	to the division to give first priority to providing the services described in Subsection (1) to the
740	office.
741	(4) The office and the division shall enter into a memorandum of understanding in
742	order to execute the requirements of this section in an effective and efficient manner.
743	Section 18. Section 63A-13-602, which is renumbered from Section 63J-4a-602 is
744	renumbered and amended to read:
745	[63J-4a-602]. <u>63A-13-602.</u> Rulemaking authority.
746	The office may make rules, pursuant to Title 63G, Chapter 3, Utah Administrative
747	Rulemaking Act, and Section 63A-13-305, that establish policies, procedures, and practices, in
748	accordance with the provisions of this chapter, relating to:
749	(1) inspecting and monitoring the state Medicaid Program;
750	(2) discovering and investigating potential fraud, waste, or abuse in the State Medicaid
751	program;
752	(3) developing and implementing the principles and standards described in Subsection
753	[63J-4a-202(1)(p)] $63A-13-202(1)(q)$;
754	(4) auditing, inspecting, and evaluating the functioning of the division under
755	Subsection [63J-4a-202(1)(h)] <u>63A-13-202(1)(h)</u> ;
756	(5) conducting an audit under Subsection [63J-4a-202(1)(h)] 63A-13-202(1)(h) or (2);
757	or
758	(6) ordering a hold on the payment of a claim for reimbursement under Section
759	[63J-4a-205] <u>63A-13-205</u> .
760	Section 19. Section 63G-2-305 is amended to read:
761	63G-2-305. Protected records.
762	The following records are protected if properly classified by a governmental entity:
763	(1) trade secrets as defined in Section 13-24-2 if the person submitting the trade secret
764	has provided the governmental entity with the information specified in Section 63G-2-309;
765	(2) commercial information or nonindividual financial information obtained from a
766	person if:
767	(a) disclosure of the information could reasonably be expected to result in unfair
768	competitive injury to the person submitting the information or would impair the ability of the

769 governmental entity to obtain necessary information in the future;

- (b) the person submitting the information has a greater interest in prohibiting access than the public in obtaining access; and
- (c) the person submitting the information has provided the governmental entity with the information specified in Section 63G-2-309;
- (3) commercial or financial information acquired or prepared by a governmental entity to the extent that disclosure would lead to financial speculations in currencies, securities, or commodities that will interfere with a planned transaction by the governmental entity or cause substantial financial injury to the governmental entity or state economy;
- (4) records the disclosure of which could cause commercial injury to, or confer a competitive advantage upon a potential or actual competitor of, a commercial project entity as defined in Subsection 11-13-103(4);
- (5) test questions and answers to be used in future license, certification, registration, employment, or academic examinations;
- (6) records the disclosure of which would impair governmental procurement proceedings or give an unfair advantage to any person proposing to enter into a contract or agreement with a governmental entity, except, subject to Subsections (1) and (2), that this Subsection (6) does not restrict the right of a person to have access to, once the contract or grant has been awarded, a bid, proposal, or application submitted to or by a governmental entity in response to:
 - (a) a request for bids;
 - (b) a request for proposals;
- (c) a grant; or
 - (d) other similar document;
- (7) records that would identify real property or the appraisal or estimated value of real or personal property, including intellectual property, under consideration for public acquisition before any rights to the property are acquired unless:
- (a) public interest in obtaining access to the information is greater than or equal to the governmental entity's need to acquire the property on the best terms possible;
- (b) the information has already been disclosed to persons not employed by or under a duty of confidentiality to the entity;

- (c) in the case of records that would identify property, potential sellers of the described property have already learned of the governmental entity's plans to acquire the property;
- (d) in the case of records that would identify the appraisal or estimated value of property, the potential sellers have already learned of the governmental entity's estimated value of the property; or
- (e) the property under consideration for public acquisition is a single family residence and the governmental entity seeking to acquire the property has initiated negotiations to acquire the property as required under Section 78B-6-505;
- (8) records prepared in contemplation of sale, exchange, lease, rental, or other compensated transaction of real or personal property including intellectual property, which, if disclosed prior to completion of the transaction, would reveal the appraisal or estimated value of the subject property, unless:
- (a) the public interest in access is greater than or equal to the interests in restricting access, including the governmental entity's interest in maximizing the financial benefit of the transaction; or
- (b) when prepared by or on behalf of a governmental entity, appraisals or estimates of the value of the subject property have already been disclosed to persons not employed by or under a duty of confidentiality to the entity;
- (9) records created or maintained for civil, criminal, or administrative enforcement purposes or audit purposes, or for discipline, licensing, certification, or registration purposes, if release of the records:
- (a) reasonably could be expected to interfere with investigations undertaken for enforcement, discipline, licensing, certification, or registration purposes;
- (b) reasonably could be expected to interfere with audits, disciplinary, or enforcement proceedings;
- (c) would create a danger of depriving a person of a right to a fair trial or impartial hearing;
- (d) reasonably could be expected to disclose the identity of a source who is not generally known outside of government and, in the case of a record compiled in the course of an investigation, disclose information furnished by a source not generally known outside of government if disclosure would compromise the source; or

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831 (e) reasonably could be expected to disclose investigative or audit techniques, 832 procedures, policies, or orders not generally known outside of government if disclosure would 833 interfere with enforcement or audit efforts; 834 (10) records the disclosure of which would jeopardize the life or safety of an 835 individual; 836 (11) records the disclosure of which would jeopardize the security of governmental 837 property, governmental programs, or governmental recordkeeping systems from damage, theft, 838 or other appropriation or use contrary to law or public policy; 839 (12) records that, if disclosed, would jeopardize the security or safety of a correctional 840 facility, or records relating to incarceration, treatment, probation, or parole, that would interfere 841 with the control and supervision of an offender's incarceration, treatment, probation, or parole; 842 (13) records that, if disclosed, would reveal recommendations made to the Board of 843 Pardons and Parole by an employee of or contractor for the Department of Corrections, the 844 Board of Pardons and Parole, or the Department of Human Services that are based on the 845 employee's or contractor's supervision, diagnosis, or treatment of any person within the board's 846 jurisdiction; 847 (14) records and audit workpapers that identify audit, collection, and operational 848 procedures and methods used by the State Tax Commission, if disclosure would interfere with 849 audits or collections; 850 (15) records of a governmental audit agency relating to an ongoing or planned audit 851 until the final audit is released; 852 (16) records that are subject to the attorney client privilege; 853 (17) records prepared for or by an attorney, consultant, surety, indemnitor, insurer, 854 employee, or agent of a governmental entity for, or in anticipation of, litigation or a judicial, 855 quasi-judicial, or administrative proceeding; 856 (18) (a) (i) personal files of a state legislator, including personal correspondence to or 857 from a member of the Legislature; and

(ii) notwithstanding Subsection (18)(a)(i), correspondence that gives notice of

(b) (i) an internal communication that is part of the deliberative process in connection

legislative action or policy may not be classified as protected under this section; and

with the preparation of legislation between:

862	(A) members of a legislative body;
863	(B) a member of a legislative body and a member of the legislative body's staff; or
864	(C) members of a legislative body's staff; and
865	(ii) notwithstanding Subsection (18)(b)(i), a communication that gives notice of
866	legislative action or policy may not be classified as protected under this section;
867	(19) (a) records in the custody or control of the Office of Legislative Research and
868	General Counsel, that, if disclosed, would reveal a particular legislator's contemplated
869	legislation or contemplated course of action before the legislator has elected to support the
870	legislation or course of action, or made the legislation or course of action public; and
871	(b) notwithstanding Subsection (19)(a), the form to request legislation submitted to the
872	Office of Legislative Research and General Counsel is a public document unless a legislator
873	asks that the records requesting the legislation be maintained as protected records until such
874	time as the legislator elects to make the legislation or course of action public;
875	(20) research requests from legislators to the Office of Legislative Research and
876	General Counsel or the Office of the Legislative Fiscal Analyst and research findings prepared
877	in response to these requests;
878	(21) drafts, unless otherwise classified as public;
879	(22) records concerning a governmental entity's strategy about:
880	(a) collective bargaining; or
881	(b) imminent or pending litigation;
882	(23) records of investigations of loss occurrences and analyses of loss occurrences that
883	may be covered by the Risk Management Fund, the Employers' Reinsurance Fund, the
884	Uninsured Employers' Fund, or similar divisions in other governmental entities;
885	(24) records, other than personnel evaluations, that contain a personal recommendation
886	concerning an individual if disclosure would constitute a clearly unwarranted invasion of
887	personal privacy, or disclosure is not in the public interest;
888	(25) records that reveal the location of historic, prehistoric, paleontological, or
889	biological resources that if known would jeopardize the security of those resources or of
890	valuable historic, scientific, educational, or cultural information;
891	(26) records of independent state agencies if the disclosure of the records would
892	conflict with the fiduciary obligations of the agency;

- (27) records of an institution within the state system of higher education defined in Section 53B-1-102 regarding tenure evaluations, appointments, applications for admissions, retention decisions, and promotions, which could be properly discussed in a meeting closed in accordance with Title 52, Chapter 4, Open and Public Meetings Act, provided that records of the final decisions about tenure, appointments, retention, promotions, or those students admitted, may not be classified as protected under this section;
- (28) records of the governor's office, including budget recommendations, legislative proposals, and policy statements, that if disclosed would reveal the governor's contemplated policies or contemplated courses of action before the governor has implemented or rejected those policies or courses of action or made them public;
- (29) records of the Office of the Legislative Fiscal Analyst relating to budget analysis, revenue estimates, and fiscal notes of proposed legislation before issuance of the final recommendations in these areas;
- (30) records provided by the United States or by a government entity outside the state that are given to the governmental entity with a requirement that they be managed as protected records if the providing entity certifies that the record would not be subject to public disclosure if retained by it;
- (31) transcripts, minutes, or reports of the closed portion of a meeting of a public body except as provided in Section 52-4-206;
- (32) records that would reveal the contents of settlement negotiations but not including final settlements or empirical data to the extent that they are not otherwise exempt from disclosure;
- (33) memoranda prepared by staff and used in the decision-making process by an administrative law judge, a member of the Board of Pardons and Parole, or a member of any other body charged by law with performing a quasi-judicial function;
- (34) records that would reveal negotiations regarding assistance or incentives offered by or requested from a governmental entity for the purpose of encouraging a person to expand or locate a business in Utah, but only if disclosure would result in actual economic harm to the person or place the governmental entity at a competitive disadvantage, but this section may not be used to restrict access to a record evidencing a final contract;
 - (35) materials to which access must be limited for purposes of securing or maintaining

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924	the governmental entity's proprietary protection of intellectual property rights including patents,
925	copyrights, and trade secrets;

- (36) the name of a donor or a prospective donor to a governmental entity, including an institution within the state system of higher education defined in Section 53B-1-102, and other information concerning the donation that could reasonably be expected to reveal the identity of the donor, provided that:
 - (a) the donor requests anonymity in writing;
- (b) any terms, conditions, restrictions, or privileges relating to the donation may not be classified protected by the governmental entity under this Subsection (36); and
- (c) except for an institution within the state system of higher education defined in Section 53B-1-102, the governmental unit to which the donation is made is primarily engaged in educational, charitable, or artistic endeavors, and has no regulatory or legislative authority over the donor, a member of the donor's immediate family, or any entity owned or controlled by the donor or the donor's immediate family;
- 938 (37) accident reports, except as provided in Sections 41-6a-404, 41-12a-202, and 939 73-18-13;
- 940 (38) a notification of workers' compensation insurance coverage described in Section 941 34A-2-205;
 - (39) (a) the following records of an institution within the state system of higher education defined in Section 53B-1-102, which have been developed, discovered, disclosed to, or received by or on behalf of faculty, staff, employees, or students of the institution:
 - (i) unpublished lecture notes;
 - (ii) unpublished notes, data, and information:
- 947 (A) relating to research; and
- 948 (B) of:
- 949 (I) the institution within the state system of higher education defined in Section
- 950 53B-1-102; or
- 951 (II) a sponsor of sponsored research;
- 952 (iii) unpublished manuscripts;
- 953 (iv) creative works in process;
- 954 (v) scholarly correspondence; and

955 (vi) confidential information contained in research proposals; 956 (b) Subsection (39)(a) may not be construed to prohibit disclosure of public 957 information required pursuant to Subsection 53B-16-302(2)(a) or (b); and (c) Subsection (39)(a) may not be construed to affect the ownership of a record; 958 959 (40) (a) records in the custody or control of the Office of Legislative Auditor General 960 that would reveal the name of a particular legislator who requests a legislative audit prior to the 961 date that audit is completed and made public; and 962 (b) notwithstanding Subsection (40)(a), a request for a legislative audit submitted to the 963 Office of the Legislative Auditor General is a public document unless the legislator asks that 964 the records in the custody or control of the Office of Legislative Auditor General that would 965 reveal the name of a particular legislator who requests a legislative audit be maintained as 966 protected records until the audit is completed and made public; 967 (41) records that provide detail as to the location of an explosive, including a map or 968 other document that indicates the location of: 969 (a) a production facility; or 970 (b) a magazine; 971 (42) information: 972 (a) contained in the statewide database of the Division of Aging and Adult Services 973 created by Section 62A-3-311.1; or 974 (b) received or maintained in relation to the Identity Theft Reporting Information 975 System (IRIS) established under Section 67-5-22; 976 (43) information contained in the Management Information System and Licensing 977 Information System described in Title 62A, Chapter 4a, Child and Family Services; 978 (44) information regarding National Guard operations or activities in support of the 979 National Guard's federal mission; 980 (45) records provided by any pawn or secondhand business to a law enforcement 981 agency or to the central database in compliance with Title 13, Chapter 32a, Pawnshop and 982 Secondhand Merchandise Transaction Information Act; 983 (46) information regarding food security, risk, and vulnerability assessments performed 984 by the Department of Agriculture and Food; 985 (47) except to the extent that the record is exempt from this chapter pursuant to Section

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986	63G-2-106, records related to an emergency plan or program, a copy of which is provided to or
987	prepared or maintained by the Division of Emergency Management, and the disclosure of
988	which would jeopardize:
989	(a) the safety of the general public; or
990	(b) the security of:
991	(i) governmental property;
992	(ii) governmental programs; or
993	(iii) the property of a private person who provides the Division of Emergency
994	Management information;
995	(48) records of the Department of Agriculture and Food that provides for the
996	identification, tracing, or control of livestock diseases, including any program established under
997	Title 4, Chapter 24, Utah Livestock Brand and Anti-theft Act or Title 4, Chapter 31, Control of
998	Animal Disease;
999	(49) as provided in Section 26-39-501:
1000	(a) information or records held by the Department of Health related to a complaint
1001	regarding a child care program or residential child care which the department is unable to
1002	substantiate; and
1003	(b) information or records related to a complaint received by the Department of Health
1004	from an anonymous complainant regarding a child care program or residential child care;
1005	(50) unless otherwise classified as public under Section 63G-2-301 and except as
1006	provided under Section 41-1a-116, an individual's home address, home telephone number, or
1007	personal mobile phone number, if:
1008	(a) the individual is required to provide the information in order to comply with a law,
1009	ordinance, rule, or order of a government entity; and
1010	(b) the subject of the record has a reasonable expectation that this information will be
1011	kept confidential due to:
1012	(i) the nature of the law, ordinance, rule, or order; and
1013	(ii) the individual complying with the law, ordinance, rule, or order;
1014	(51) the name, home address, work addresses, and telephone numbers of an individual
1015	that is engaged in, or that provides goods or services for, medical or scientific research that is:

(a) conducted within the state system of higher education, as defined in Section

1017	53B-1-102; and
1018	(b) conducted using animals;
1019	(52) an initial proposal under Title 63M, Chapter 1, Part 26, Government Procurement
1020	Private Proposal Program, to the extent not made public by rules made under that chapter;
1021	(53) in accordance with Section 78A-12-203, any record of the Judicial Performance
1022	Evaluation Commission concerning an individual commissioner's vote on whether or not to
1023	recommend that the voters retain a judge;
1024	(54) information collected and a report prepared by the Judicial Performance
1025	Evaluation Commission concerning a judge, unless Section 20A-7-702 or Title 78A, Chapter
1026	12, Judicial Performance Evaluation Commission Act, requires disclosure of, or makes public,
1027	the information or report;
1028	(55) records contained in the Management Information System created in Section
1029	62A-4a-1003;
1030	(56) records provided or received by the Public Lands Policy Coordinating Office in
1031	furtherance of any contract or other agreement made in accordance with Section 63J-4-603;
1032	(57) information requested by and provided to the Utah State 911 Committee under
1033	Section 53-10-602;
1034	(58) recorded Children's Justice Center investigative interviews, both video and audio,
1035	the release of which are governed by Section 77-37-4;
1036	(59) in accordance with Section 73-10-33:
1037	(a) a management plan for a water conveyance facility in the possession of the Division
1038	of Water Resources or the Board of Water Resources; or
1039	(b) an outline of an emergency response plan in possession of the state or a county or
1040	municipality;
1041	(60) the following records in the custody or control of the Office of Inspector General
1042	of Medicaid Services, created in Section [63J-4a-201] 63A-13-201:
1043	(a) records that would disclose information relating to allegations of personal
1044	misconduct, gross mismanagement, or illegal activity of a person if the information or
1045	allegation cannot be corroborated by the Office of Inspector General of Medicaid Services
1046	through other documents or evidence, and the records relating to the allegation are not relied
1047	upon by the Office of Inspector General of Medicaid Services in preparing a final investigation

1048	report	or	final	audit	report

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- (b) records and audit workpapers to the extent they would disclose the identity of a person who, during the course of an investigation or audit, communicated the existence of any Medicaid fraud, waste, or abuse, or a violation or suspected violation of a law, rule, or regulation adopted under the laws of this state, a political subdivision of the state, or any recognized entity of the United States, if the information was disclosed on the condition that the identity of the person be protected;
- (c) before the time that an investigation or audit is completed and the final investigation or final audit report is released, records or drafts circulated to a person who is not an employee or head of a governmental entity for the person's response or information;
- (d) records that would disclose an outline or part of any investigation, audit survey plan, or audit program; or
- (e) requests for an investigation or audit, if disclosure would risk circumvention of an investigation or audit;
- (61) records that reveal methods used by the Office of Inspector General of Medicaid Services, the fraud unit, or the Department of Health, to discover Medicaid fraud, waste, or abuse;
- (62) information provided to the Department of Health or the Division of Occupational and Professional Licensing under Subsection 58-68-304(3) or (4); and
 - (63) a record described in Section 63G-12-210.
- Section 20. Section **63.J-4-202** is amended to read:
 - 63J-4-202. Appointment of director and state planning coordinator.
 - (1) (a) The governor shall appoint, to serve at the governor's pleasure:
 - (i) a director of the Governor's Office of Planning and Budget; and
- (ii) a state planning coordinator.
 - (b) The state planning coordinator is considered part of the office for purposes of administration.
 - (2) The governor shall establish the director's salary within the salary range fixed by the Legislature in Title 67, Chapter 22, State Officer Compensation.
- [(3) (a) In accordance with Section 63J-4a-201, the governor shall appoint, with the advice and consent of the Senate, the inspector general of the Office of Inspector General of

1079	Medicaid Services.]
1080	[(b) The Office of Inspector General of Medicaid Services is considered part of the
1081	office for purposes of administration.]
1082	Section 21. Transition of Office of Inspector General of Medicaid Services to the
1083	Department of Administrative Services.
1084	(1) The inspector general for Medicaid services in office on January 1, 2013, shall
1085	serve as the transition director for the transition of the office of the inspector general of
1086	Medicaid services into the Department of Administrative Services and shall transition the
1087	office of the inspector general of Medicaid services into the Department of Administrative
1088	Services on or before July 1, 2013.
1089	(2) Notwithstanding the provisions of Subsection 63J-1-206, all records, personnel,
1090	property, equipment, grants, unexpended and unexpired balances of appropriations, allocations,
1091	and other funds used, held, employed, available, or to be made available to the office of the
1092	inspector general within the Governor's Office of Planning and Budget for the activities,
1093	powers, duties, functions, and responsibilities transferred to the office of the inspector general
1094	of Medicaid Services within the Department of Administrative Services by this bill shall
1095	transfer to the office of the inspector general of Medicaid Services within the Department of
1096	Administrative Services.
1097	(3) The transition director shall administer the functions of this bill in a manner that
1098	promotes efficient administration and shall make internal organizational changes as necessary
1099	to complete the realignment of responsibilities required by this bill.
1100	(4) The governor and the governor's designee may request the assistance of any
1101	executive branch agency with respect to personnel, budgeting, procurement, information
1102	systems, and other management related functions, and the executive branch agency shall
1103	provide the requested assistance.
1104	(5) All rules, orders, contracts, grants, and agreements relating to the functions of the
1105	office of the inspector general of Medicaid services lawfully adopted prior to the effective date
1106	of this bill by the responsible state executive branch agency shall continue to be effective until
1107	revised, amended, or rescinded.
1108	(6) Any suit, action, or other proceeding lawfully commenced by, against, or before

any entity affected by this chapter shall not abate by reason of this bill.

1110	(7) This uncodified section "Transition of Inspector General of Medicaid Services" is		
1111	repealed on July 1, 2014.		
1112	Section 22. Appropriation.		
1113	Under the terms and conditions of Title 63J, Chapter 1, Budgetary Procedures Act, for		
1114	the fiscal year beginning July 1, 2013, and ending June 30, 2014, the following sums of money		
1115	are appropriated from resources not otherwise appropriated, or reduced from amounts		
1116	previously appropriated, out of the funds or accounts indicated. These sums of money are in		
1117	addition to any amounts previously appropriated for fiscal year 2014.		
1118	To Governor's Office of Planning and Budget - Inspector General of Medicaid Services		
1119	From General Fund (1,020,200)		
1120	<u>From Transfers</u> (1,962,600)		
1121	From Pass-through 733,400		
1122	From Beginning Nonlapsing Balances (865,300)		
1123	Schedule of Programs		
1124	<u>Inspector General of Medicaid Services</u> (\$3,114,700)		
1125	The Legislature intends that the Division of Finance transfer unexpended appropriations		
1126	and balances of appropriations, up to the amounts shown above, from the Governor's Office of		
1127	Planning and Budget to the Department of Administrative Services for fiscal year 2014.		
1128	To Department of Administrative Services - Inspector General of Medicaid Services		
1129	From General Fund 1,020,200		
1130	<u>From Transfers</u> <u>1,962,600</u>		
1131	From Pass-through (733,400)		
1132	From Beginning Nonlapsing Balances 865,300		
1133	Schedule of Programs		
1134	<u>Inspector General of Medicaid Services</u> \$3,114,700		
1135	The Legislature intends that the Division of Finance transfer unexpended appropriations		
1136	and balances of appropriations, up to the amounts shown above, from the Governor's Office of		
1137	Planning and Budget to the Department of Administrative Services for fiscal year 2014.		
1138	Section 23. Effective date.		
1139	If approved by two-thirds of all the members elected to each house, this bill takes effect		
1140	upon approval by the governor, or the day following the constitutional time limit of Utah		

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- 1141 Constitution Article VII, Section 8, without the governor's signature, or in the case of a veto,
- the date of veto override.